



# Providence House

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**This edition of Providence House News is dedicated to  
Older Adults and their lived experience of Chronic Illness.**

***Trish Carroll, Provisional Psychologist & Intern with many years of experience in working with Older Adults and their family members, and who has recently commenced her internship at Providence House, writes about the impact of chronic illness on psychological wellbeing for older adults and their families - for your consideration.***

**Older Australians** (65 to 100 +) are a diverse and valued group, with different ages, cohorts, cultures, personalities, family history and circumstances, socioeconomic backgrounds and life experiences. All of these factors influence the ageing process and the risk of (and reaction to) chronic illness/disease.

**The Australian Institute of Health and Welfare (AIHW) defines** chronic diseases as long-lasting conditions with persistent effects and social and economic consequences which can impact on older adults' quality of life. **The most common chronic diseases/conditions** among older Australians include: cancer, cardiovascular disease, neurological, musculoskeletal and respiratory conditions, vision and hearing loss, arthritis, elevated blood pressure or cholesterol levels.

## Older Adults & Chronic Illness

Adjusting to a diagnosis (and ongoing experience) of chronic illness involves multiple losses, transitions and stressors in all dimensions of an older adult's life. This experience can have a significant impact on the psychological wellbeing for an older adult and their family/loved ones.

Older adults living with chronic illness are therefore at heightened risk of experiencing a range of mental health symptoms, including:

- depressed mood and/or anxiety;
- disturbed emotions and conduct;
- emotional and/or behavioural dysregulation; and/or
- various maladaptive reactions.



## Upcoming Events

**December 20**

Close for Christmas Break

**January 7**

Re-open for 2020

**February 11**

Positive Health Group

## Making an Appointment

A referral from  
**GPs, Psychiatrists, and  
Paediatricians**

under a  
**Mental Health Care Plan**  
entitles patients to  
**10 individual & 10 group  
sessions**

Those with a Mental health Care Plan & HealthCare Card will be eligible reduced fees.

No out of pocket fees are available for clients prepared to work with Provisional Psychologists delivering services under Supervision

**Face to face services**  
are also available at  
**Capalaba in Redlands, Qld  
&  
Tenterfield, NSW**

## Psychological Services Available to Rural & Remote

We would like to advise that practitioners are now available to take referrals for  
**TELEHEALTH Services.**

**Please call for more  
information.**

These symptoms can in some instances combine and/or escalate to meet the diagnostic criteria of an Adjustment Disorder or another mental health condition.

Older adults with a diagnosis of chronic illness are more likely to experience comorbidities – AIHW cites 50% of 65-75 years may have up to 5 chronic illnesses. This increases to 70% for older Australians aged 85+. Comorbidities can include physical, neurological or psychological conditions, and can seriously increase the risk of adjustment disorder, particularly with depression and/or anxiety.

Older adults experiencing chronic illness, particularly where comorbidities are present, may require increased care within the community or residential aged care. This inevitably creates significant life transitions for older adults and their families/loved ones, accompanied by complex grief and loss and experienced uniquely by each individual.

The extent and nature of the biopsychosocial impacts of chronic disease depends on a range of interdependent factors (see Fig 1)

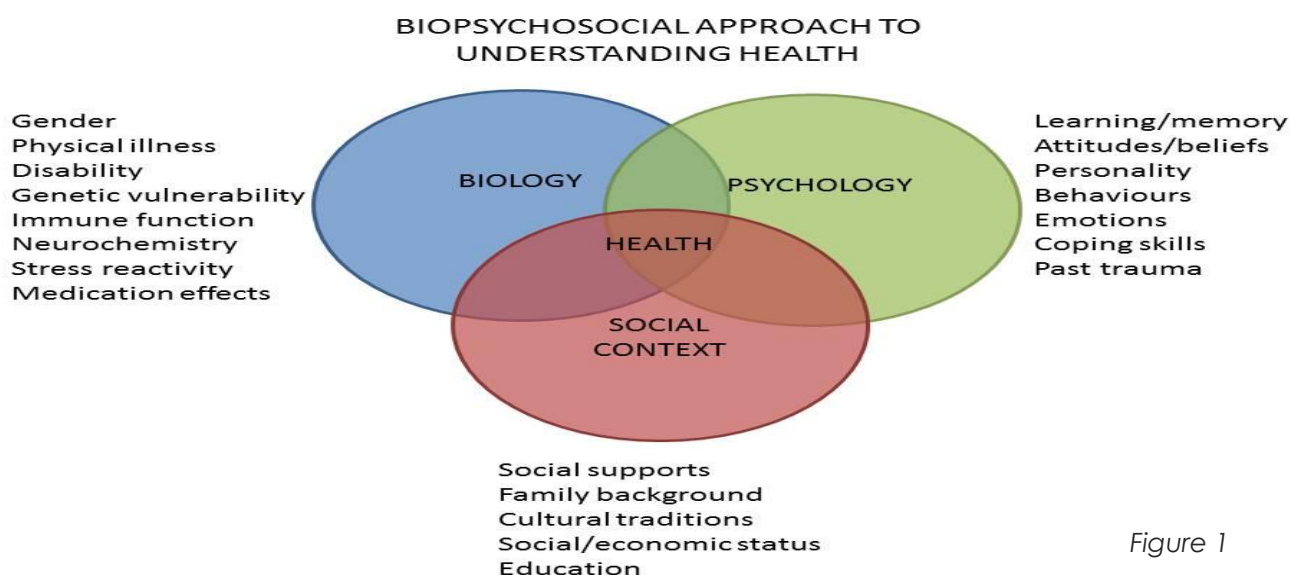


Figure 1

## Role of Psychologists

Psychologists can provide a range of specialized support services to identify and reduce mental health symptoms for older adults experiencing chronic illnesses:

- Assessment, formulation and diagnosis of mental health symptoms for an older adult experiencing chronic illness/es;
- Identifying the range of factors influencing the individual's experience of chronic illness (e.g., memory, grief and loss, trauma, beliefs, comorbidities, thought processes, etc.);
- identification of critical factors such as personality structure or comorbid physical or mental health conditions that may impact treatment outcomes;
- Support for life transitions triggered by an older adult's diagnosis of chronic illness /es;
- Psychoeducation and psychological support for family members/carers, as required;
- Suggested referrals to other specialist health providers.

Psychologists can also provide valuable support, collaboration and psychoeducation for other clinicians and allied health providers engaged in care provision and care planning.

**Older adults may be reluctant to attend or engage in psychological support.** Psychologists and other health providers can create an opportunity for engagement with older adults by considering the following:

- Listen intently and attentively to their story and family circumstance (see Fig. 1);
- Acknowledge the uniqueness and culture of each older adult;
- Tailor pace, language and approach for each client;
- Invite questions, reservations and/or concerns;
- Clear and respectful communication style;
- Respect 'silences' to patiently wait for responses;
- Acknowledge the process and impact of the life review process for older adults; and
- Involvement of family members, as appropriate, and consideration of carer stress.

Engel (1988) suggested that **health professionals consider the following unspoken question of older adults** when providing health and allied health services:

*"Do you know who I am, who I have been, who I still want to be? Do you understand what I am going through, my suffering, my pain, my distress? Do you understand my hopes and aspirations, my fears and shames, my vulnerabilities and strengths, my needs and obligations and my values? Above all, do you sense my personhood and my individuality? Do you acknowledge my humanity? Do you care?"*

#### Useful Resources

AIHW Australia: <https://www.aihw.gov.au/reports/older-people/older-australia-at-a-glance/contents/health-functioning/burden-of-disease>

Knight, B. and Shurgot, G. (2008) *Psychological assessment and treatment with older adults: past trends and future directions*. Handbook of Emotional Disorders in Later Life: Edited by Knight and Laidlaw.

***Should you want to include a psychologist in your multidisciplinary care team please do not hesitate to arrange a referral to a Psychologist at Providence House.***



#### **Author: Trish Carroll**

##### **Provisional Psychologist and Counsellor**

I am a Provisional Psychologist, recently completed Master of Professional Psychology (MPP) Program.

I am also a tertiary qualified counsellor with 10+ years of experience providing counselling and psycho-education services to older adults and their families in diverse circumstances, including: grief, loss and bereavement; health and capacity challenges; transition to aged care; elder care; transition to retirement; living with dementia; depression and anxiety. Complementing this experience is

my role as an EAP provider for employees in aged care and other industries and previously, as a Career Consultant and HR Practitioner.



#### **Clinical Director: Christina Hully**

##### **Clinical, Counselling & Ed&Dev Psychologist**

At this time of year, I reflect upon the support that doctors, other professional, community groups and clients have given us here at Providence House. On behalf of the psychologists who provide services here I would like to thank-you and wish you all the best for the Christmas Season.

**Regards, Wendy Taylor, Shannon Quinn, Wesley Felsman, Jorge Ruiz, Deb Worboys, Janet Stalewski, Trish Carroll**